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757 7590 04/22/2004

GENERAL NUMBER 00757
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JoAnn F. Dilloway	(Depositor's name)
<i>JoAnn F. Dilloway</i>	(Signature)
5/14/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/754,829	01/03/2001	Mark J. Purdy	4865/120	1428

TITLE OF INVENTION: PRESSURE GRADIENT CVI/CVD APPARATUS, PROCESS AND PRODUCT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHEN, BRET P	1762	427-248100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Goodrich Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Charlotte, NC

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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(Authorized Signature) *Helen A. Odar* (Date) 5/14/04
Helen A. Odar

05/19/2004 MAHME2 00000195 09754829

01 FC:1501
02 FC:1504

1330.00 OP
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